THE EUROPEAN HEALTH FORUM GASTEIN (EHFG) - results and perspectives

INTERVIEW with GÜN ThER LEINER

Günther Leiner, MD (1939) is a key figure in the field of the European Public Health. He is an Austrian doctor of internal medicine and until this year he was the President of the International Forum Gastein. He was re-elected as a member of the Austrian Parliament in 1999, where he was Deputy Chair of the Health Committee and fraction leader of his party. As MP, he was the representative of the Austrian Parliament in the Roundtable on Human Genetics of the European Parliament. In the 1990s he founded the International Forum Gastein, one of the leading health policy conferences in the European Union.

The European Health Forum Gastein (EHFG) was founded in 1998 as an European health policy conference, with the aim of providing a platform for discussion for the various stakeholders in the field of public health and health care. Since then, the EHFG has developed into a key annual event, bringing together politicians, senior decision-makers, representatives of interest groups and experts coming from government and administration, business and industry, civil society, science and academia. These four groups of stakeholders with their perspectives constitute the four pillars of the EHFG.

The EHFG facilitates the exchange of views and experience amongst key actors and experts from the 27 EU members and the EEA countries, and also from the other 52 countries of the WHO European region, and even beyond. Launched with major financial support from the European Commission, subsequent Forums have grown with the continued and extended co-operation of Commission services. From this point of view, the Forum can be considered as a pilot project and benchmark for any Commission civil society consultation process. In discussing key health challenges, the EHFG had over the years many topics related to the future of financing in health care, present and future challenges of health and health care in the EU; integrating health care in all policies; values in health and also subjects related to crisis in health care financing.

During the last 15 years the EHFG has had a strong contribution to European health policy, a task rather difficult and challenging to undertake if we take in to account many of the limitations and barriers of the EU countries.

This year, between 3 and 6 October, important stakeholders like the (now former) EU Health Commissioner John Dali, WHO Europe Regional Director Zsuzsanna Jakab, the London School of Hygiene and Tropical Medicine’s Professor Martin McKee, European Commission Director-General for Health and Consumer Protection Robert Madelin, and many others shared their views and ideas about “Crisis and Opportunity – Health in an Age of Austerity”, the main theme of this year’s congress.

Reporter: Professor Günther Leiner, firstly, can you give us a brief history of the resourceful idea of bringing together in the wonderful scenery of the Gastein Valley the key stakeholders from policy making to research? How did it all start?

Günther Leiner: I was an MP in the Austrian Parliament from 1990 until 2002 and in this context I realised that Public Health in the European Union is not anymore related only to national legislation, but there is an increasing need to collaborate at the Union level because diseases are not taking account of the political or regional boundaries, for example communicable diseases, smoking policies, cardio-vascular diseases, etc. The idea of the Forum came up to establish a European platform where all the challenges related to European health could be approached in a coherent and uniform way. For me, at the beginning it was a little bit easier to have a view from both sides, from a physician and a politician’s perspective. This, I think, was a great advantage for the Forum because many of the politicians and the policy makers have different perspectives on the health of the population and health care in particular. From trying to combine these two different views and to create a coherent dialogue between medical doctors and politicians the original idea of the Forum came up. After bringing together the politicians and the medical doctors, the world of research and the NGO were added. In this way, we managed to bring together all the four actors of health care: providers, policy makers, researchers and NGOs, including patient’s organisations. In this way, each actor has the chance to promote the ideas that he or she thinks will be of great benefit for the population. In the summer of 1996 I had a chance encounter with former Irish European Commissioner Flynn, and I presented my vision about the idea mentioned above. He was very enthusiastic and advised me that I should found an Association to start the Forum. He also ensured me that the Commission would support the initiative. Also, the Commissioner named a few persons that I could approach and cooperate with to put the idea into practice. And this was the beginning. This was the starting point of all this. We started by convoking members of the Forum committee from the four pillars, and also some key persons representing
the provinces of Austria. At the same time we managed to establish the Advisory Committee in Brussels with leaders from various institutions that had something to do with health policy or research issues. After the Advisory Committee was put in place, various topics were taken into discussion about the theme of the Forum. Many countries and institutions at the EU level showed interest in these health issues and they wanted to have an active role in this Forum. Whenever a good idea was put forward we always found some companies or institutions to support that idea. So, in conclusion from 1996 until 1998 the Forum went through a preliminary phase and from that moment on each year we have managed to organise a successful EHFG, this year celebrating the 15th edition.

**R:** During the history of the EHFG, which were the critical turning points? What shaped the actual form of this event?

**G L:** The process of developing the EHFG in this present form continues. It grew in an organic and natural way. Firstly, we did not want that the Forum was influenced by any political parties so from the beginning we minimised this influence from the political world. Then we decided that the pharmaceutical industry or any other private organisation should not make any direct advertising or independent exhibition during the Forum. We accepted that they could nominate a speaker who was not working for the company sponsoring the Forum or a specific workshop. The speaker cannot represent the ideas of the company directly. If the food industry for example shows great interest in decreasing the quantity of pesticides in agriculture, they can have a speech at the conference about the impact of these pesticides on population health, but they cannot directly incriminate the agriculture industry. These decisions were roughly speaking the turning points that shaped the actual form of the Forum. One time the Health Commissioner came up with the idea to move the Forum to Brussels, but it was only a weak attempt. When I found out about this intention I immediately got in touch with the Austrian Federal Chancellor and he spoke to Barroso and the idea was off the table immediately.

**R:** Besides the continuity process of the Forum for 15 years, what are the results that you are most proud of?

**G L:** If we go back a little, when I was a politician, I always found it difficult to look up unbiased scientific evidence and information related to health policy. How should I, as a politician shape the law and the legislation as a member of the Austrian Parliament without having a fundamental unbiased finding? This was one of the reasons for, and I think one of the results of this Forum. All the politicians with an interest in the Public Health area paid great attention to this idea, they found inspiration but also solid data that were used to build policies in their own region or country. Of course, this kind of output cannot be measured in a quantitative way, but I think is of great interest to us. Also, every person coming to this Forum is becoming more aware of the problems that are arising and that have to be addressed in the short or long term. The challenges discussed here are passed from the European Commission to the European Parliament word by word and in this way the legislative institution can make more informed legislative proposals. Actually, the Forum has also provided the foundation for health legislation at the European Union level. One example was the case of an official from Denmark that took the ideas and results from the EHFG and implemented them directly into the Danish health system. It is a great pride for me that within this Forum all the regions of Europe have the chance to translate the newest research into health policies according to their needs.

**R:** Related to the subject of this year’s edition of EHFG “‘Crisis and Opportunity – Health in an Age of Austerity’” what is, in your opinion, the impact of the financial crisis on health systems in Europe?

**G L:** For many years, one of the topics of the Forum related to the scarcity of the budgetary resources and economic constraints of the health system. Since 2008, many European governments have been forced to drastically reduce spending. Because the health budget consumes a great proportion of national budget, many politicians decided to make cuts in this sector. This gives rise to very strange and contradictory situations because we have on the one hand the idea of cost cutting in health care that has a negative impact on the health of the population and the productivity of the workforce, and on the other hand we have the financial crisis that cannot be overcome without increasing the productivity of the workforce. Also, we have to take into consideration that health care is consuming more and more resources mainly related to over-diagnosis and over-treatment, within the phenomenon that in general is known as the medicalisation of society. The increasing demand induced by this has a negative impact on the general financing of health care. A health care reform approach in a continuous and progressive manner can be a general answer to the challenges mentioned above, but precautions related to covering essential services especially in hospital reforms must be taken. Economic problems facing EU health systems should not be solved by depriving patients of the treatment they require.

A good thing that could result from this crisis is that politicians finally confront the reforms that would otherwise have taken years to undertake. This could be the opportunity of the crisis: that limited resources can be used in a more efficient way for the patient, using cutting-edge economic evaluation analysis.

**R:** In your opinion what is the future of these kind of events like the EHFG? What personal expectations do you have?

**G L:** The EHFG is the foundation for future health policy in Europe and especially important is that the youth are involved, as they are the architects of the Europe of the future. I think the EHFG could also broaden out so that we have one day Fora in different countries and regions of the EU. The focus of these could be on country specific problems in order to find country specific solutions involving local experts and the expertise of EHFG supporters.